



BUSINESS LICENSE APPLICATION

FEE: \$50.00

Name of Business: _____ Phone: _____

Federal Tax # _____ State Tax # _____

Street Address of Business: _____ Mailing Address of Business: _____

Description of Business: _____

Tax Payer Identification # (TPT) _____

Owner of Business:

Name: _____

Address: _____

Work Phone: _____ Home Phone: _____

If Corporation:

Contact Person: _____

Address: _____ Phone: _____

*******OFFICE USE ONLY*******

Fee Amount: _____ Cash or Check #: _____ Date Paid: _____